

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|---------|
| FEE DETERMINATION | | 69821 | 1/7 |
| O.I.P.E. CLASSIFIER | | 5 | 1/14/99 |
| FORMALITY REVIEW | | 66500 | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 1 | ✓ | ✓ | 10/19/01 |
| 2 | ✓ | ✓ | " |
| 3 | ✓ | ✓ | " |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)